## **Transportation**

MIHS-HP provides transportation for medically necessary visits when the member is unable to secure needed transportation. Transportation includes bus passes, taxi cabs, wheelchair and stretcher vans. A MIHS-HP Transportation Quick Reference Grid is included to assist with transportation benefits and billing.

MIHS-HP expects it transportation providers to:

- treat MIHS-HP members with dignity and respect
- pick-up the member at least one (1) hour prior to the member's scheduled appointment time
- Escort physically or mentally compromised, wheelchair, and/or stretcher van patients to the reception area to ensure the proper transportation company is contacted if necessary

Authorizations for members that are ambulatory will be faxed from the MIHS-HP Transportation Unit. Transports are usually round-trip unless otherwise specified. Transports for complex patients with chronic diseases that may prevent ambulating require authorization. Authorizations may be given up to six-months. Basic Life Support (BLS) and Advanced Life Support (ALS) must be authorized before services being provided.

## **Emergency Transports do not require authorization.**

MIHS-HP Transportation Unit Fax # **344-**8515:

Wheelchair and stretcher vans are utilized from MIHS to take clients to medical visits. Members are encouraged to call five (5) to ten (10) days in advance or as soon as an appointment at the clinic is scheduled. The MIHS transportation office can be reached at 602/267-5245. Authorization is not required.

Additional transportation available in the community includes:

American Red Cross	. 267-5811
Reserve a Ride	. 262-4501
Dial-a-Ride:	
Phoenix	. 253-4000
Mesa/Chandler	. 497-4500
Glendale	. 931-5432
Scottsdale	. 996-2600
Peoria Transit	. 412-7435
Vicap	. 285-0543

These types of transportation must be set up ahead of time and may require a small fee.

Maricopa Health Plan provides free bus cards for medical visits. The MIHS-HP Family Health Clinics can also give a member a single use bus ticket.

## Transportation cont.

Please report suspected fraud or abuse of the transportation benefit to:

MIHS-HP Fraud and Abuse Coordinator 2502 East University Drive, Suite B1 Phoenix, Arizona 85039

Please contact MIHS-HP Provider Services at 602/344-8957 with questions regarding transportation.

## MARICOPA INTEGRATED HEALTH SYSTEMS HEALTH PLANS (MIHS-HP) TRANSPORTATION QUICK REFERENCE GRID

Plan Name	Product Type	Transportation Benefit	Member Services	Medical Services	Claims Address	Claims Submissions Requirements
Health Select OPTION 1	Maricopa County Employee Benefit Health Plan Self Funded Employee Benefit Program for County Employees and their Dependents	NO	602/344-8300 800 582 8686 FAX 344- 8515	602/344-8111 (24 hours 7 days a week for urgent, emergent services)	P O BOX 20019 Phoenix AZ 85039-0019 602/344-8555	N/A
Maricopa Health Plan (MHP)	Funded in part by the State of Arizona Health Care Cost Containment System (AHCCCS) and the Health Care Financing Administration (HCFA). This program is designed to provide access to care for those who qualify.	YES	602/344-8300 800 582 8686 FAX344-8515	602/344-8111 (24 hours 7 days a week for urgent, emergent services)	P O BOX 20019 Phoenix AZ 85039-0019 602/344-8555	Claims should be submitted on a HCFA 1500  Claims should be submitted within 9 months from the date of service  All member demographic information <i>must</i> be on the HCFA (i.e.: Member's name, address, ID#)  Claims submissions must include a place of service. Box 24B must include the code of 41(place of service)
Arizona Long Term Care (ALTCS)	Funded by the State of Arizona Health Care Cost Containment System (AHCCCS) Designed to provide access to Long Term Care Services for those who qualify.	YES	602/344-8300 800 582 8686 FAX344-8515	602/344-8111 (24 hours 7 days a week for urgent, emergent services)	P O BOX 20019 Phoenix AZ 85039-0019 602/344-8555	SEE ABOVE
Maricopa Senior Select (MSSP)	Funded by the Health Care Financing Administration (HCFA). This program is designed to provide access to care for the elderly & those who qualify.	In some instances	602/344-8300 800 582 8686 FAX344-8515	602/344-8111 (24 hours 7 days a week for urgent, emergent services)	P O BOX 20019 Phoenix AZ 85039-0019 602/344-8555	SEE ABOVE
Kids Care	Funded in part by the State of Arizona Health Care Cost Containment System (AHCCCS) and the Health Care Financing Administration (HCFA). This program is designed to provide access to care for those who qualify.	YES	602/344-8300 800 582 8686 FAX344-8515	602/344-8111 (24 hours 7 days a week for urgent, emergent services)	P O BOX 20019 Phoenix AZ 85039-0019 602/344-8555	SEE ABOVE

Report suspected cases of Fraud and Abuse involving MIHS-HP Members to: Fraud and Abuse Coordinator, MIHS-HP 2502 E University Dr, C2, Phoenix AZ 85039 Provider Services Main Line – 602/344- 8957 Provider Services Fax Number 602/344-8933